

#### ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER	+MAD105613293		
	JOES SERVICE CENTER		
	31 MAIN ST NORTH READING	MA	01864
INSTALLATION ADDRESS	31 MAIN ST		
	NORTH READING	所角	01864

EPA Form 8700-12B (4-80)

04/20/87



# CC MONWEALTH OF MASSACHUSETTS Department of Environmental Quality Engineering

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

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For Official Use Only	INSTALLATION'S EPA I.D. NUMBER	DATE ISSUED mo. day year
	MAD105613293	17 17 80
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Print or type with ELITE type (12 characters/inch) in the boxes.	Refer to Line-by-Line Instruction	ons
I. NAME OF INSTALLATION (Do not punctuate or use in	nitials)	Faff a serviced docu-
JOE'S SERVICE CETER		
II. INSTALLATION MAILING ADDRESS	to according to	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Street or Post Office Box	Vun IIIIIII	1 7 1986
	State Zip Code	ARC ME IN
City or Town	State Zip Code	
NORTH READING		
III. LOCATION OF INSTALLATION		
Street or Route Number	Mie	dellased
		617
City or Town	State Zip Code	1/
[   SAME		/ /
IV. PRINCIPAL ACTIVITY	4 digit SIC number Description	
4 digit SIC number Description Gen Aut RPR	TITLE DESCRIPTION	
V. INSTALLATION CONTACT	Title Phone N	lumber de) (number)
Name (last, first)	owner 617	6648553
VI. OWNERSHIP  Name of Installation's Legal Owner	Type of Own	nership
LOUETERC JOSEPH D	FEDERAL D	
Name of the Legal Owner of the Property		p years and
CASUELL BOWARD		
VII. TYPE OF HAZARDOUS WASTE ACTIVITY End	ter X on the appropriate line.	
Mezerdous Waste Activity Waste Fuel	Activity Type of Combustion Device	
Large quantity generator Generator m	arketing to burner 16 a burner, specify:	
Small quantity generator Other mathe		An K
Transporter 0Burner 40  Transporter 0Burner 40	Industrial boiler	
Wastewater Treatment Wait	us veste fuel • Sayles a	
* A Missachusells license is nequiredOll-spe	cification used oil fuel ** A Massachusells Ac as Acquared. cation used oil fuel	eyeling peamil
other than financings munified from the Caste-across cus negligibutions as	IO CANCIOLOTO PACE MARIO POR CANCIONAL AND	uniter Aurent un
Please continue on the second page of this form.	to the state of the state of the state of	

Enter the four-digit n	F HAZARDOUS Wounder from the Massa se additional sheets if	ichusetts Regulations 1	110 CMR for each lis	sted hazardous waste w	which your in-
D codes - Char	acteristic Non-L	isted Hazardous	Wastes. See 3	0.121 through 30	.125.
ndal			Щ		
F and M codes	- Hazardous Wast	es from Non-Spec	ific Sources.	See 30.131.	
MoloII				шш	
Flodz					
K codes - Haza	rdous Wastes fro	om Specific Source	ces. See 30.13	2.	N
U codes - Comm	mercial Chemical	Product Hazardo	us Wastes. See	30.133.	ľ
- Wit-		Ш			
P codes - Acu	tely Hazardous W	astes. See 30.1	36.		
. COMMENTS	勃				
☐ Sheet Attached					
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. CERTIFICATION	A 31.5				8
ments, and that based of true, accurate, and com- prisonment.	n my inquiry of those indivi- plete. I am aware that there	duals immediately responsite are significant penalties for	submitting false informat	ubmitted in this document a mation, I believe that the sul tion, including the possibility	of fine and im-
such muneral he heart c	antidential and and the Dec	olied with this application w partment has made a determ ment-Records and Files unde	instion of confidentiality	ofidential unless I have specifi in accordance with 310 CM Management Act.	R J.00, Regulations
SIGNATURE Dep	h Of Vet	NAME & OFFI Bal TOSEPA O	CIALTITLE (1ype or	oner 116	INED 186

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## HAZARDOUS WASTE FACTS FOR COMPANIES USING PARTS CLEANING SERVICES

#### NOTIFICATION PROCEDURE

If your shop produces a hazardous waste, you are subject to a national system which tracks your waste from the point of generation to its final disposal. In Massachusetts you are required to use a transporter and disposal facility which are licensed to handle hazardous waste. An 8-part shipping document, called a "manifest," follows the waste from "cradle" to "grave." You should keep a copy of each manifest in your files for a minimum of three years.

The first step in the manifest system, once you have identified your waste, is to obtain a federal identification number. For assistance in completing this form, or in locating a transporter or disposal facility, telephone the Massachusetts Department of Environmental Quality Engineering (617)292-5587.

#### WHERE TO FILE

When you have completed your notification form, sign it and mail it to:

Gwen Ruta EPA Region I/MA Waste Mgmt. Branch HRR-CAUS J.F.K. Federal Bldg. Boston, MA 02203

#### LINE-BY-LINE INSTRUCTIONS

### PRINT IN BLACK INK OR TYPE, LEAVING A BLANK BOX BETWEEN WORDS.

- I. Name of Installation. "Installation" means your business. Do not punctuate. If initials are used in the legal name, leave a blank box between initials.
- II. Installation Mailing Address. Abbreviate "street" or "parkway" and similar words.
- III. Location of Installation. Print "SAME" if the location is the same as the mailing address. Please include a street number, or, if none, the nearest cross street.
- IV. Principal Activity. The standard industrial classification (SIC) is a 4-digit code:

3491 Metal fabrication 3541 Machine shop

7535 Automotive Paint Shop 7538 General Automotive Repair Shop

- V. <u>Installation Contact</u>. Enter the name (last name first), job title and business telephone number of the person who should be contacted regarding information submitted on this form.
- VI. Ownership. Print "SAME"in the second row if the legal owner of the property is also the legal owner of your business. Unless you are owned or operated by the federal government, check Non-Federal.
- VII. Type of Hazardous Waste Activity. If, in a month's time, you produce no more than a total of 2200 pounds (1,000 kilograms) of hazardous waste and you accumulate no more than this at any one time, you qualify as a SMALL QUANTITY GENERATOR. A LARGE QUANTITY GENERATOR is defined as one who produces over 1,000 kilograms of hazardous waste per month and does not store any hazardous waste over 90 days. Small quantity generators have a maximum of 180 days in which to keep their hazardous waste on site.

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WASTE FUEL ACTIVIT. is checked if you sell or offer waste oil directly to one who burns waste fuels for energy recovery or if you burn waste oil or solvents. Burners are subject to a recycling permit. For information or a permit application, contact DEQE (617) 292-5786 or 292-5905.

VIII. Description of Hazardous Wastes. Hazardous wastes are classified according to their characteristics - ignitable, corrosive, reactive or toxic. In addition, there are many individual chemicals and compounds listed as hazardous. For a complete listing of wastes, consult the Massachusetts Hazardous Waste Management Regulations (310 CMR 30.000) which are available through the State House Bookstore (617)727-2834.

Some of the most common wastes produced by machine and repair shops are:

Waste Petroleum Naptha (Mineral Spirits)	Waste Code
Because the flash point is less than 140° F this solvent is classified as an ignitable waste.	D001
Waste Compound Cleaning Liquid	F002
This solvent is typically used for cleaning carburetors.	

Paint Thinners and Flammable Paint Wastes

D001

Lead Paint

D008

Although most paints manufactured within the past five years have a low percent of lead, some lead paint wastes are toxic. (5.0 milligrams per liter or more is toxic.) To determine this, a special toxicity test may be required.

Waste Oil and Grease

M001

EACH TYPE OF WASTE SHOULD BE STORED SEPARATELY IN A SAFE, TIGHT CONTAINER AND PROPERLY LABELED WITH THE TYPE OF WASTE AND ITS HAZARDS AND THE INITIAL DATE OF ACCUMULATION.

- IX. Comments. Additional information can be entered here.
- X. <u>Certification</u>. The owner or an authorized representative should sign. <u>Unsigned forms</u> will be returned for signature.

## To change information submitted on this form:

Please notify DEQE in writing if you move, change the name of your business, your mailing address, or type of wastes, or any other items in the notification form.